after the injection there is a brief increase in reflex irritability, somewhat later a diminution, and, finally, a disappearance after the arrest of the heart's action. These effects are produced by a direct action on the spinal cord, since they appear at the same time in a leg which is exposed to the action of the poison as in one which is excluded from the action by ligature of the artery.—*Lancet*, Nov. 9, 1878.

Hypnotic Action of Sodium Lactate.

W. VON BÖTTCHER (*Berliner Klin. Wochenschrift*, 1877, No. 37) states that the effects of lactic acid as an hypnotic were tried upon 60 cases. The dose of the sodium salt varied from 8 to 15 cubic centimetres. Of these 60 cases, 39 gave negative, whilst 21 gave positive results. In 7 of the 21 positive cases, the effect of the lactic acid was to give sound sleep after an hour's interval; in 9 cases the ordinary sleep became deeper, whilst in others again there was an abnormal feeling of fatigue. The action was relatively more certain in young females when administered upon an empty stomach, and in the evening. There was no period of excitation before the advent of sleep, but the after effects upon the digestion were most unpleasant. Lactic acid is, therefore, to be considered as an untrustworthy hypnotic.—*Lond. Med. Record*, Oct. 15, 1878.

Anæsthetic Properties and Mode of Elimination of Iodide of Ethyl.

M. RABUTEAU, in a note read before the Société de Biologie (*Gazette Médicale de Paris*, October 12, 1878), discusses the anæsthetic properties and mode of elimination of iodide of ethyl. This, the ordinary hydriodic ether, is a colourless liquid of a pleasant ethereal smell, with a piquant taste, which, however, is not caustic, as in the case of chloroform; its density is 1.946. It is readily soluble in alcohol, and in ether, but only very slightly so in water. Mingled with water it falls to the bottom, dissolving so far as to impart its taste and smell to the mixture. It volatilizes readily at the ordinary temperature, producing cold. It boils at 72.2° C. (161.96° Fahr.), but is not inflammable. Iodide of ethyl is rapidly altered by light, becoming brown from liberation of iodine, but it may be again made colourless by shaking it with water which has been rendered feebly alkaline, and afterwards washing with pure water. It is slowly decomposed by the alkalies, and by the oxide and salts of silver. Iodide of ethyl is therefore an unstable ether. The body is formed by the action of hydriodic acid upon ethyl-alcohol, iodide of ethyl and water being formed. Experiments with fowls, frogs, and plants show that iodide of ethyl is an anæsthetic which acts more slowly than bromide of ethyl and chloroform, that its effects are more persistent, that it is broken up in the organism into an iodide which is probably the iodide of sodium, that it is found in the saliva and urine, and that, like bromide of ethyl, chloroform, and ordinary ether, it prevents germination.—*Lond. Med. Record*, Nov. 15, 1878.

Pelletiérine.

M. DUJARDIN-BEAUMETZ, at the meeting of the Société de Thérapeutique on June 26th (*Gazette Hebdomadaire*), read a paper on the action of "pelletiérine" when used as an anthelmintic. He showed a tænia which had been expelled after the use of this new alkaloid, which was discovered by Tauret (of Troyes). The dose administered was 57 centigrammes (eight grains) of "pelletiérine" in 300 grammes of water. In about a quarter of an hour headache and faintness were experienced by the patient; after two hours he took a dose of castor oil, and in the course of the day an entire tænia was passed. Similar results have been obtained by M. Mollé (of Troyes) and Garnier (of Mans); but MM. Laboulbène and G. Paul did not find it so satisfactory; they, however, only gave from 25 to 30 centigrammes. There is no doubt that it is a powerful anthelmintic; it should be used along with the compound tincture of jalap and the syrup of senna.—*London Med. Record*, Dec. 15, 1878.

The Medicinal Uses of Iodoform.

The numbers of the *Wiener Medizinische Wochenschrift*, 24 to 28 inclusive (1878), contain interesting papers on this subject by Professor MOLESCHOTT, of Turin, Dr. MRACEK, clinical assistant to Professor Sigmund at Vienna, and Professor ZEISSL, of Vienna. Professor Moleschott's paper will be found in full in the current number of the MONTHLY ABSTRACT (page 4).

Dr. Mracek briefly reports the result of the external use of iodoform in Sigmund's clinic during the early part of 1878. It was applied in one of the following forms: One part iodoform to (*a*) 1 of rectified spirit, and 5 of glycerine; (*b*) 3 to 4 parts powdered white sugar; (*c*) 5 parts vaseline; or as collodion (1-10 or 1-15). A small brush was used to spread them; cotton-wool was then laid over the part, and fixed with plaster. The dressing stayed unchanged for from twelve to twenty-four hours. Syphilitic ulcers, hard chancres, swollen inguinal glands, and ulcerating gummata were treated with success. The iodoform causes next to no pain; the sores acquire a clean surface in twenty-four to forty-eight hours, in three to four days granulations are rapidly growing, and within a week cicatrization has set in with remarkable vigour. The antiseptic effect of the iodoform checks all smell from gangrenous sores; and lastly, iodoform does not permanently stain the clothes. Compared with lotions of carbolic acid, salicylic acid, chloral, and astringent preparations of iron, etc., in precisely similar cases, iodoform carries off the palm.

Professor Zeissl especially recommends iodoform as an internal remedy in syphilitic neuralgia, and describes two cases which, resisting all other remedies, yielded only to iodoform. In suppurating glands, with or without sinuses, he is averse to the local application of iodoform for more than a few days; but in torpid ulcers, whether specific or not, he speaks most warmly of its value.—*Med. Times and Gaz.*, Nov. 30, 1878.

Effect of Bicarbonate of Potash on the Acidity of Urine.

Dr. C. H. RALFE, Teacher of Physiological Chemistry in the Medical School, St. George's Hospital, has made some observations (*Lancet*, Nov. 9, 1878) to test the effect of bicarbonate of potash on the reaction of the urine when taken before and when taken after meals.

He found that the effect of bicarbonate of potash, taken after food, on the acidity of the urine, is different from that when it is administered before meals.

For when taken on an empty stomach the acidity on the day of administration was only slightly depressed, whilst on the day following the acidity was considerably higher than it was the day before the salt was taken. But when it was administered during the process of digestion the acidity of the urine entirely disappeared, being on two occasions neutral, and on one alkaline, whilst on the succeeding days there was no marked increase in the acidity of the urine as compared with that of the days preceding the experiment. And the same difference is observable in the hourly variations of the urine, for when the bicarbonate was taken before meals the effect of the alkali passed off at the end of two hours, and the amount of acid passed in the succeeding three hours was nearly equal to what was passed on the day no medicine was taken; whilst when the salt was taken